|  |   |   |              |                                  |                     |                            |                |            | Application or Docket Number |       |                     |                        |
|--|---|---|--------------|----------------------------------|---------------------|----------------------------|----------------|------------|------------------------------|-------|---------------------|------------------------|
| •  | PATENT  | APPLICATION Effec                           |              | DETERM<br>ber 1, 20              |                     | ION RECOI                  | RD             | 1          | hyot                         | 5.    | 069                 | 7P64                   |
| CLAIMS AS FILED - PART I (Column.1) (Column.2)                           |   |   |              |                                  |                     |                            |                |            | NTITY                        | OR    | OTHER               |                        |
| TO   | OTAL CLAIMS   |   | 20           |                                  |                     |                            | RA             | ΓE         | FEE                          | 1     | RATE                | FEE                    |
| FOR  |   |   | NUMBER FILED |                                  | NUMBER EXTRA        |                            | BASIC          | FEE        | 385.00                       | OR    | BÁSIC FEÉ           | 770.00                 |
| TOTAL CHARGEABLE CLAIMS  |   |   | 20 minus 20= |                                  | • &-                |                            | XS             | XS 9=      |                              | OR    | X\$18=              |                        |
| INC  | DEPENDENT C   | LAIMS                                       | Uminus 3 =   |                                  | 6                   |                            | X43=           |            |                              | OR    | . X86=              |                        |
| ML   | ILTIPLE DEPE  | VDENT CLAIM P                               | RESENT       |                                  |                     |                            | +145=          |            |                              | OR    | 290=                |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2 |   |   |              |                                  |                     |                            |                | TOTAL      |                              | OR    | TOTAL               | <b>新70</b>             |
| (Column 1) (Column 2) (Column 3)   |   |   |              |                                  |                     |                            | SMA            | L L        | ENTITY                       | OR    | OTHER               | THAN                   |
| AMENDMENT A  | 20  | (Column 1) CLAIMS REMAINING AFTER AMENDMENT | ·            | HIGH<br>NUM<br>PREVIC<br>PAID    | EST<br>BEA<br>DUSLY | PRESENT EXTRA.             |                | RATE       | ADDI-<br>TIONAL<br>FEE       |       | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total   | . 20  | Minus        | -3                               |                     | - /                        | XS 9           | ) <u> </u> | 7                            | OR    | X\$18=              |                        |
|  | Independent   | -3  | Minus        | 1110                             | 3                   | 1./                        | X43=           |            |                              | OR    | X86=                | 7                      |
| Ľ  | FIRST PRESE   | NTATION OF M                                | ULTIPLE DI   | EPENDENT                         | CLAIM               |                            | +145           | 5=         | /                            | ОЯ    | +290=               |                        |
|  |   |   |              | tel.                             |                     |                            | ADDIT.         | ITAL       | 1.                           |       | TOTAL<br>ADDIT, FEE | 1                      |
|  |   | (Column 1)                                  |              | (Colur                           | nn 2)_              | (Column 3)                 | <b>ADDI1</b> . | ree        |                              |       | بران د.<br>د د.     | ¥                      |
| AMENDMENT B  | 3/1/0=  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |              | HIGH<br>NUM<br>PREVIO<br>PAID    | BER                 | PRESENT<br>EXTRA           | RAT            | E          | ADDI-<br>TIONAL<br>FEE       |       | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total   | · 20  | Minus        |                                  | <u> 20</u>          | . ——                       | XSS            | )=         |                              | ОЯ    | X\$18=              | .ca                    |
|  | Ind pendent   | NTATION OF MI                               | Minus        | EDENDENT                         | CL AIM              | 1                          | X43            | 2          |                              | OR    | X86=                | <i>4</i> .             |
|  | PINOT PINEOU  |   | J            | LI ENOCH.                        | 00                  |                            | +145           | 2          |                              | OR    | +290=               | ir<br>ensis            |
|  | •   |   |              |                                  |                     | J                          | ADDIT.         | TAL        |                              | OR    | ADDIT, FEE          |                        |
|  |   | (Column 1)                                  |              | (Colum                           | nn 2)               | (Column 3)                 |                | ٠          |                              | 4     | *                   |                        |
| AMENDMENTC   | المراجعة الم | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |              | HIGH<br>NUME<br>PREVIO<br>PAID I | BER                 | PRESENT<br>EXTRA           | RAT            | E          | ADDI-<br>TIONAL<br>FEE       |       | FATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total   | •   | Minus        |                                  |                     | 0                          | X\$ 9          | 6          |                              | OR    | X\$18=              |                        |
|  | Independent   |   | Minus        | ***                              |                     |                            | X43            |            |                              |       | X86=                |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |              |                                  |                     |                            | -              |            |                              | OR    |                     | · ż                    |
|  |   |   | a amerika da |                                  | ·                   |                            | +145           |            |                              | OR    | +290=               | Ž.                     |
| •  | I the "Highest No   | mn 1 is less than the<br>mber Previously Pa | ud For IN TI | HIS SPACE L                      | less tha            | n 20, erder 20.            | ADDOT S        | AL<br>EE   |                              | ÖЯ    | NOOT, FEE           | 2.,                    |
| -  | n ore rugness Num<br>The Highest Num  | riber Previously Pa                         | d For (Total | or independe                     | ent) is the         | n 1 emer<br>highest number | ound in th     |            | propriete ba                 | in co | uma I.              | \$ .                   |

FORM FTO 875 (REE 1000)

Patient and Trademath Office, U.S. DEPARTMENT OF COMMERCE